Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF WISCONSIN	-	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

B 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	David	Elizabeth
	your government-issued picture identification (for	First name	First name
	example, your driver's	W	M
	license or passport).	Middle name	Middle name
	Bring your picture	Meints	Meints
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8025	xxx-xx-2253

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)	■ I have not used any business name or EINs.  Business name(s)
		EINs	EINs
5.	Where you live	2720 N 87th Street Milwaukee, WI 53222	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Milwaukee	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

	otor 1 otor 2	David W Meints Elizabeth M Meint	s				Case r	number (if known)	
Par	t 2:	Tell the Court About Y	our Bank	ruptcy Cas	se				
7.	Bank	chapter of the ruptcy Code you are			rief description of each, see <i>N</i> ne top of page 1 and check th			. § 342(b) for Individual	s Filing for Bankruptcy (Form
	choo	sing to file under	☐ Chap	ter 7					
			☐ Chap	ter 11					
			☐ Chap	ter 12					
			■ Chap	ter 13					
8.	How	you will pay the fee	ab	out how you	y is submitting your payment	e paying the	e fee yourself, you	may pay with cash, ca	shier's check, or money order.
					the fee in installments. If ynstallments (Official Form 103		this option, sign a	nd attach the Application	on for Individuals to Pay The
			no yo	t required to ur family siz	o, waive your fee, and may do	so only if y the fee in in	our income is less stallments). If you	s than 150% of the office choose this option, you	r 7. By law, a judge may, but is sial poverty line that applies to u must fill out the <i>Application</i>
9.		you filed for	□ No.						
	8 yea	ruptcy within the last	Yes.						
				District	WI Eastern District- Ch 13 dismissed	When	7/28/11	Case number	11-31735
				District		When		Case number	
				District		When		Case number	
10.		ny bankruptcy cases ing or being filed by	■ No						
	a spo this o a bus	buse who is not filing case with you, or by siness partner, or by filiate?	☐ Yes.						
				Debtor				Relationship to y	ou
				District		When		Case number, if	known
				Debtor				Relationship to y	
				District		When		Case number, if	known
11.		ou rent your ence?	■ No.	Go to li	ne 12.				

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

☐ Yes.

No. Go to line 12.

bankruptcy petition.

	otor 1 David W Meints otor 2 Elizabeth M Meint	s			Case number (if known)
Par	Report About Any Bus	sinesses `	You Own	as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a		Numb	er, Street, City, Stat	e & ZIP Code
	separate sheet and attach it to this petition.		Check	the appropriate bo	x to describe your business:
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you inc	dicate that you are a	court must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure in 11
	For a definition of small	■ No.	I am r	ot filing under Chap	ter 11.
	business debtor, see 11 U.S.C. § 101(51D).	☐ No.	I am fi Code.	ling under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is	the hazard?	
	safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
	- ·				Number Street City State & Zip Code

**David W Meints** Debtor 1 Debtor 2 **Elizabeth M Meints** 

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 otor 2	David W Meints Elizabeth M Meint	s		Case number	(if known)
Par	t 6:	Answer These Questi	ons for Re	eporting Purposes		
16.	What you h	kind of debts do nave?	16a.		onsumer debts? Consumer debts are define onal, family, or household purpose."	ed in 11 U.S.C. § 101(8) as "incurred by an
				☐ No. Go to line 16b.		
				Yes. Go to line 17.		
			16b.		usiness debts? Business debts are debts the or through the operation of the business or inv	
				☐ No. Go to line 16c.		
				☐ Yes. Go to line 17.		
			16c.	State the type of debts you ow	ve that are not consumer debts or business d	ebts
17.		ou filing under ter 7?	■ No.	I am not filing under Chapter 7	7. Go to line 18.	
	any e	ou estimate that after exempt property is ded and	☐ Yes.		to you estimate that after any exempt property le to distribute to unsecured creditors?	is excluded and administrative expenses are
		nistrative expenses aid that funds will be		□ No		
	availa	able for distribution secured creditors?		Yes		
18.		many Creditors do	<b>■</b> 1-49		<b>1</b> ,000-5,000	<b>2</b> 5,001-50,000
	you e owe?	estimate that you	□ 50-99		<b>5</b> 001-10,000	50,001-100,000
			☐ 100-1 ☐ 200-9		☐ 10,001-25,000	☐ More than100,000
			<u> </u>			
19.		much do you	□ \$0 - \$		☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	be wo	ate your assets to orth?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
				001 - \$500,000 001 - \$1 million	\$50,000,001 - \$100 million  \$100,000,001 - \$500 million	☐ More than \$50 billion
			<b>—</b> фооо,			
20.		much do you ate your liabilities to	□ \$0 - \$	The state of the s	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	be?	late your nabilities to		001 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
				001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100 million	☐ More than \$50 billion
Par	t 7:	Sign Below				
For	you		I have ex	amined this petition, and I decla	are under penalty of perjury that the information	on provided is true and correct.
					I am aware that I may proceed, if eligible, unclable under each chapter, and I choose to pro	
				rney represents me and I did no ained and read the notice requir	ot pay or agree to pay someone who is not an red by 11 U.S.C. § 342(b).	attorney to help me fill out this document, I
			I request	relief in accordance with the ch	napter of title 11, United States Code, specifie	ed in this petition.
			case can		concealing property, or obtaining money or proor imprisonment for up to 20 years, or both. 1	

Elizabeth M Meints Signature of Debtor 2

Executed on **April 1, 2016** MM / DD / YYYYY

/s/ David W Meints
David W Meints
Signature of Debtor 1

Executed on **April 1, 2016** MM / DD / YYYY

Debtor 1	David W Meints	
Debtor 2	Elizabeth M Meints	Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Adam L. Lombardo	Date	April 1, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Adam L. Lombardo		
Printed name		
Lombardo Law Office		
Firm name		
10919 West Bluemound Road		
Suite 200		
Milwaukee, WI 53226		
Number, Street, City, State & ZIP Code		
Contact phone (414) 543-3328	Email address	wendi@lombardolawoffice.com
1035810		
Bar number & State		

1b. Copy line 62, Total personal property, from Schedule A/B	First Name Middle Name Last Name  Debtor 2 (Spouse if, filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: EASTERN DISTRICT OF WISCONSIN  Case number	☐ Che	
Debtor 2   Elizabeth M Meints   First Name   Middle Name   Last Na	Debtor 2 (Spouse if, filing)  First Name  Middle Name  Last Name  United States Bankruptcy Court for the:  EASTERN DISTRICT OF WISCONSIN  Case number	☐ Che	
United States Bankruptcy Court for the: EASTERN DISTRICT OF WISCONSIN  Case number (If known)  Official Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1: Summarize Your Assets  Your assets  Value of what you own  1. Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 62, Total personal property, from Schedule A/B	(Spouse if, filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: EASTERN DISTRICT OF WISCONSIN  Case number	□ Che	
Case number (if known)  Case number (if known)  Check if this is an amended filing  Official Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1: Summarize Your Assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	Case number	□ Che	
Official Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1:  Summarize Your Assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B		☐ Che	
Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1:  Summarize Your Assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	(II KIIOWII)	ame	
information. Fill out all of your schedules first; then complete the information on this form. If you are filling amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.    Part 1:   Summarize Your Assets   Your assets	Summary of Your Assets and Liabilities and Certain Statistical Information		
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	nformation. Fill out all of your schedules first; then complete the information on this form. If you are filing amended our original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B			
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B			
1a. Copy line 55, Total real estate, from Schedule A/B		· a.a.	o oa. you o
1c. Copy line 63, Total of all property on Schedule A/B	1. Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$_	143,300.00
Part 2: Summarize Your Liabilities  Your liabilities Amount you owe  2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	1b. Copy line 62, Total personal property, from Schedule A/B	\$_	60,893.00
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	1c. Copy line 63, Total of all property on Schedule A/B	\$_	204,193.00
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	Part 2: Summarize Your Liabilities		
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  \$ 157,412.00  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F			
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>		\$_	157,412.00
		\$_	600.00
Your total liabilities \$ 230,624.00	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$_	72,612.00
	Your total liabilities	\$	230,624.00

### Part 4: Answer These Questions for Administrative and Statistical Records

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
  - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
  - Yes
- 7. What kind of debt do you have?
  - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
  - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. 8.

7,946.81

\$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	600.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	600.00

Page 9 of 60

	ormation to identify y	our case and thi	s filing:	:				
Debtor 1	David W Meir	nts						
Dalatan	First Name		Name	Last Name				
Debtor 2 (Spouse, if filing)	Elizabeth M N First Name		Name	Last Name				
United States I	Bankruptcy Court for th	e: EASTERN	DISTRI	CT OF WISCONSIN				
	., .,						_	
Case number								Check if this is ar amended filing
_	orm 106A/B ule A/B: Pr	operty						12/15
nformation. If m Answer every qu	more space is needed, at uestion.	tach a separate sh	eet to th	married people are filing together, l nis form. On the top of any addition Estate You Own or Have an Interes	nal pages, wr			•
Yes. When	ere is the property?							
	ere is the property?		What	: is the property? Check all that apply	V.			
1.1	ere is the property?  87th Street		What	is the property? Check all that apply Single-family home	•	Do not deduct secured	claims	or exemptions. Put
1.1 <b>2720 N</b>		ription	What	Single-family home	C th	Do not deduct secured the amount of any secu Creditors Who Have Cl	red clai	ms on Schedule D:
1.1 <b>2720 N</b>	87th Street	ription	■ □	Single-family home  Duplex or multi-unit building  Condominium or cooperative	C th	he amount of any secu	red clai	ms on Schedule D:
1.1 <b>2720 N</b>	87th Street ess, if available, or other desc	ription	<b>■</b>	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	C C	he amount of any secu	red clai laims Se	ms on Schedule D:
1.1 2720 N Street addre	87th Street ess, if available, or other desc			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	C C	he amount of any secu Creditors Who Have Cl Current value of the	red clai laims Se Cu po	ims on Schedule D: ecured by Property. urrent value of the
2720 N Street addre	87th Street ress, if available, or other desc	53222-0000		Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  Investment property  Timeshare	C e	the amount of any secu Creditors Who Have Cl Current value of the entire property? \$143,300.00	red clai laims Se Cu po	urrent value of the ortion you own? \$143,300.00
2720 N Street addre	87th Street ress, if available, or other desc	53222-0000	■ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  Investment property  Timeshare  Other  has an interest in the property? Ch	C e	he amount of any secu Creditors Who Have Cl Current value of the entire property?	Cu po f your cenancy	urrent value of the ortion you own? \$143,300.00
2720 N Street addre	87th Street ress, if available, or other desc ukee WI State	53222-0000		Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  Investment property  Timeshare  Other  has an interest in the property? Ch	C e	current value of the entire property? \$143,300.00  Describe the nature of such as fee simple, to	Cu po f your cenancy	urrent value of the ortion you own? \$143,300.00
2720 N Street addre	87th Street ress, if available, or other desc ukee WI State	53222-0000	Who one.	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  Investment property  Timeshare  Other  has an interest in the property? Ch	C e	the amount of any secucreditors Who Have Claurent value of the entire property?  \$143,300.00  Describe the nature of such as fee simple, to life estate), if known	Cu po f your cenancy	urrent value of the ortion you own? \$143,300.00  ownership interest by the entireties, or
2720 N Street addre	87th Street ress, if available, or other desc ukee WI State	53222-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Ch Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anote	C e C (s a contract of the con	current value of the entire property? \$143,300.00  Describe the nature of such as fee simple, to life estate), if known  Check if this is co (see instructions)	Cu po f your cenancy	urrent value of the ortion you own? \$143,300.00  ownership interest by the entireties, or
2720 N Street addre	87th Street ress, if available, or other desc ukee WI State	53222-0000	Who one.	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property  Timeshare  Other  has an interest in the property? Ch  Debtor 1 only  Debtor 2 only  Debtor 2 only  At least one of the debtors and anoter information you wish to add abouterty identification number:  Validation	C e C (s a contract of the con	current value of the entire property? \$143,300.00  Describe the nature of such as fee simple, to life estate), if known  Check if this is co (see instructions) such as local  on 2015	Cu po f your cenancy	urrent value of the ortion you own? \$143,300.00  ownership interest by the entireties, or
2720 N Street addre	87th Street ress, if available, or other desc ukee WI State	53222-0000	Who one.	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property  Timeshare  Other  has an interest in the property? Ch  Debtor 1 only  Debtor 2 only  Debtor 2 only  At least one of the debtors and anoter information you wish to add abouterty identification number:  Validation	ther ut this item, so	current value of the entire property? \$143,300.00  Describe the nature of such as fee simple, to life estate), if known  Check if this is co (see instructions) such as local  on 2015	Cu po f your cenancy	urrent value of the ortion you own? \$143,300.00  ownership interest by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B

Schedule A/B: Property

Car	s, vans,	trucks, tractors, sport utility	vehicles, motorcycles		
□N	0				
■ Y					
■ Y	es				
3.1	Make:	Chrysler	Who has an interest in the property? Check one.	Do not deduct secured cl	
J. 1	Model:	Town & Country	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	2006	Debtor 2 only	Current value of the	Current value of the
	Approxim	nate mileage:	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Г	Other info	ormation:	At least one of the debtors and another		
			■ Check if this is community property (see instructions)	\$4,500.00	\$4,500.00
2	Make:	Chevy	Who has an interest in the property? Check one.	Do not deduct secured cl the amount of any secure	
	Model:	Lumina	Debtor 1 only	Creditors Who Have Clair	ims Secured by Property.
	Year:	1996 nate mileage:	Debtor 2 only ■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		ormation:	At least one of the debtors and another	entile property:	portion you own?
			■ Check if this is community property	\$1,500.00	\$1,500.00
<i>xar</i> ■ N	<i>nples:</i> Bo o		s and other recreational vehicles, other vehicles, and a watercraft, fishing vessels, snowmobiles, motorcycle acce		
Exar ■ N □ Y	<i>nples:</i> Bo o es	oats, trailers, motors, personal		ssories	
■ N □ Y Add	nples: Bo o es d the do u have a	oats, trailers, motors, personal  llar value of the portion you ttached for Part 2. Write tha	watercraft, fishing vessels, snowmobiles, motorcycle acce	entries for pages	\$6,000.00
Add Add you	mples: Bo o es d the do I have a Describ u own o	plants, trailers, motors, personal lilar value of the portion you ttached for Part 2. Write that be Your Personal and Househor have any legal or equitable	watercraft, fishing vessels, snowmobiles, motorcycle acce	entries for pages	\$6,000.00  Current value of the portion you own?  Do not deduct secured claims or exemptions.
Addition of the state of the st	o es d the do i have a Descrit u own o sehold gamples: No	llar value of the portion you ttached for Part 2. Write that be Your Personal and Househor have any legal or equitable goods and furnishings	watercraft, fishing vessels, snowmobiles, motorcycle acce	entries for pages	Current value of the portion you own? Do not deduct secured
Add	o es d the do i have a Descrit u own o sehold gamples: No	llar value of the portion you ttached for Part 2. Write that be Your Personal and Househor have any legal or equitable goods and furnishings Major appliances, furniture, line scribe	watercraft, fishing vessels, snowmobiles, motorcycle acce	entries for pages	Current value of the portion you own? Do not deduct secured
Addition of the state of the st	o es d the do i have a Descrit u own o sehold gamples: No	llar value of the portion you ttached for Part 2. Write that the Your Personal and Househor have any legal or equitable goods and furnishings Major appliances, furniture, line scribe  Furniture at (Living Roo 10)  Audio & Vid	own for all of your entries from Part 2, including any t number here	entries for pages	Current value of the portion you own? Do not deduct secured claims or exemptions.
Adda.you	o es d the do i have a Descrit u own o sehold gamples: No	Illar value of the portion you ttached for Part 2. Write that the Your Personal and Househor r have any legal or equitable goods and furnishings Major appliances, furniture, line (Living Roo 10)  Audio & Vid (5 TVs 400, 500, DVD Pl  Appliances (Washer & I	own for all of your entries from Part 2, including any t number here	entries for pages  40, Desk  ames	Current value of the portion you own? Do not deduct secure claims or exemptions

Official Form 106A/B

Schedule A/B: Property

page 2

	ebtor 1 David W I Elizabeth		(if known)
7.		and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; muell phones, cameras, media players, games	usic collections; electronic devices
8.	Collectibles of value  Examples: Antiques as collections  No	nd figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp memorabilia, collectibles	, coin, or baseball card collections; other
	Yes. Describe	2 Sets of China at the debtor(s) residence	\$2,500.00
9.	Equipment for sports  Examples: Sports, pho instrument  □ No  ■ Yes. Describe	tographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; car	noes and kayaks; carpentry tools; musical
		Hunting Rifle at the debtor(s) residence	\$100.00
	■ No □ Yes. Describe  Clothes  Examples: Everyday □ No	les, shotguns, ammunition, and related equipment clothes, furs, leather coats, designer wear, shoes, accessories	
	Yes. Describe	Clothing at the debtor(s) residence	\$100.00
12	. <b>Jewelry</b> Examples: Everyday □ No ■ Yes. Describe	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gel  Diamond Ring	ms, gold, silver
	Non-farm animals     Examples: Dogs, cat     No     Yes. Describe      Any other personal     No     Yes. Give specific	and household items you did not already list, including any health aids you did no	t list
15	5. Add the dollar valu Part 3. Write that n	e of all of your entries from Part 3, including any entries for pages you have attaclumber here	ned for \$17,635.00
	art 4: Describe Your Fir o you own or have an	ancial Assets / legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	. Cash  Examples: Money yo  ■ No	u have in your wallet, in your home, in a safe deposit box, and on hand when you file your p	·

Official Form 106A/B Schedule A/B: Property

page 3

	ebtor 1 ebtor 2	David W Meints Elizabeth M Meints	Case number (if kr	nown)
	☐ Yes			
17	_			
17.	Exam <sub>l</sub>	its of money oles: Checking, savings, or other financial accoun- institutions. If you have multiple accounts wi	ts; certificates of deposit; shares in credit unions, brokerage ith the same institution, list each.	e houses, and other similar
	□ No ■ Yes		Institution name:	
	_ 100		2 Checking Accounts/ 1 Savings Account	
		17.1.	US Bank	\$5,358.00
10	Dondo	mutual funda, or nublishy traded stocks		
10.		, mutual funds, or publicly traded stocks oles: Bond funds, investment accounts with broke	erage firms, money market accounts	
	☐ Yes	Institution or issuer na	ame:	
19.		ublicly traded stock and interests in incorpora renture	ated and unincorporated businesses, including an inte	rest in an LLC, partnership, and
	☐ Yes.	Give specific information about them  Name of entity:	% of ownership:	
20.	Negoti	nment and corporate bonds and other negotia iable instruments include personal checks, cashie egotiable instruments are those you cannot transf	ers' checks, promissory notes, and money orders.	
	☐ Yes.	Give specific information about them Issuer name:		
21.		ment or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), 403	B(b), thrift savings accounts, or other pension or profit-shari	ng plans
	Yes.	List each account separately.		
		Type of account:	Institution name: 401(k)	\$5,900.00
			401(k) Husband	\$26,000.00
22.	Your s		at you may continue service or use from a company olic utilities (electric, gas, water), telecommunications comp	anies, or others
	_		Institution name or individual:	
23.	Annuit No	ies (A contract for a periodic payment of money to	o you, either for life or for a number of years)	
	☐ Yes	Issuer name and description.		
24.		ts in an education IRA, in an account in a qual C. §§ 530(b)(1), 529A(b), and 529(b)(1).	lified ABLE program, or under a qualified state tuition	program.
	Yes	Institution name and description. S	Separately file the records of any interests.11 U.S.C. § 521	(c):
25.	Trusts	, equitable or future interests in property (oth	er than anything listed in line 1), and rights or powers	exercisable for your benefit
	☐ Yes.	Give specific information about them		
26.		s, copyrights, trademarks, trade secrets, and ples: Internet domain names, websites, proceeds		
		Give specific information about them		

Official Form 106A/B Schedule A/B: Property

	ebtor 1 ebtor 2	David W Meints Elizabeth M Meints	Case number (if known)	
27.		es, franchises, and other general intangibles  oles: Building permits, exclusive licenses, cooperative association holding	gs, liquor licenses, professional licenses	
	☐ Yes.	Give specific information about them		
M	oney or p	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refo	unds owed to you		
	☐ Yes. 0	Give specific information about them, including whether you already filed	the returns and the tax years	
	Examp  ■ No	support  oles: Past due or lump sum alimony, spousal support, child support, mair  Give specific information	ntenance, divorce settlement, property settler	ment
30.		amounts someone owes you  bles: Unpaid wages, disability insurance payments, disability benefits, sic  unpaid loans you made to someone else	ek pay, vacation pay, workers' compensation	, Social Security benefits;
	☐ Yes.	Give specific information		
		ts in insurance policies  oles: Health, disability, or life insurance; health savings account (HSA); c	redit, homeowner's, or renter's insurance	
	Yes.	Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
		Employer provided term life policy		\$0.00
32.	If you a died.  No	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance Give specific information	policy, or are currently entitled to receive pro	perty because someone has
33.	Examp ■ No	against third parties, whether or not you have filed a lawsuit or males: Accidents, employment disputes, insurance claims, or rights to sue	ade a demand for payment	
34.	Other c ■ No	contingent and unliquidated claims of every nature, including cour	nterclaims of the debtor and rights to set	off claims
	☐ Yes.	Describe each claim		
	■ No	ancial assets you did not already list  Give specific information		
	. Add tl	he dollar value of all of your entries from Part 4, including any ent		\$37,258.00
Pa	rt 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. Lis	t any real estate in Part 1.	
١	No. Go		y?	
L	🔟 Yes. G	Go to line 38.		

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Official Form 106A/B

page 5

Schedule A/B: Property

Debto Debto		David W Meints Elizabeth M Meints		Case number (if ki	nown)
Part 6:	Des	scribe Any Farm- and Commercial Fishing-Related Property	You O	wn or Have an Interest In.	
	If yo	ou own or have an interest in farmland, list it in Part 1.			
46 Dc	, voli	own or have any legal or equitable interest in any fa	rm- or	commercial fishing-related property?	
_		Go to Part 7.	0.	oommercial norming related property.	
	_	Go to line 47.			
	■ Yes.	Go to line 47.			
					Current value of the portion you own? Do not deduct secured claims or exemptions.
Part 7:	Des	cribe All Property You Own or Have an Interest in That You	ı Did No	ot List Above	
<i>E.</i>	xampi No	have other property of any kind you did not already les: Season tickets, country club membership  Give specific information	list?		
54. <b>/</b>	Add th	ne dollar value of all of your entries from Part 7. Write	e that r	number here	\$0.00
Part 8:	List	the Totals of Each Part of this Form			
55. <b>F</b>	Part 1	: Total real estate, line 2			\$143,300.00
56. <b>F</b>	Part 2	: Total vehicles, line 5		\$6,000.00	
57. <b>F</b>	Part 3	: Total personal and household items, line 15		\$17,635.00	
58. <b>F</b>	Part 4	: Total financial assets, line 36		\$37,258.00	
59. <b>F</b>	Part 5	: Total business-related property, line 45	·	\$0.00	
60 [	Part 6	: Total farm- and fishing-related property, line 52	_	\$0.00	
		: Total rains and rishing-related property, line 32		\$0.00 \$0.00	

\$60,893.00

Copy personal property total

Official Form 106A/B

Schedule A/B: Property

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$60,893.00

\$204,193.00

Fill in this infor	mation to identify your			
Debtor 1	David W Meints			
	First Name	Middle Name	Last Name	
Debtor 2	Elizabeth M Meir	nts		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F WISCONSIN	
Case number (if known)				☐ Check if this is an amended filing

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt	

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	m Check only one box for each exemption.			
2720 N 87th Street Milwaukee, WI 53222 Milwaukee County	\$143,300.00		\$29,792.00	11 U.S.C. § 522(d)(1)	
Value based on 2015 assessed value Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
2006 Chrysler Town & Country Line from Schedule A/B: 3.1	\$4,500.00		\$4,500.00	11 U.S.C. § 522(d)(2)	
Line Iron Schedule A.B. 3.1			100% of fair market value, up to any applicable statutory limit		
1996 Chevy Lumina Line from Schedule A/B: 3.2	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(5)	
Line Iron Schedule A.B. 3.2			100% of fair market value, up to any applicable statutory limit		
Furniture at the debtor(s) residence (Living Room Set 600, 3 Bedroom	\$1,850.00		\$1,850.00	11 U.S.C. § 522(d)(3)	
Sets 1200, Kitchen Set 40, Desk 10) Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
Audio & Video at the debtor(s)	\$1,920.00		\$1,920.00	11 U.S.C. § 522(d)(3)	
(5 TVs 400, 3 Computers 1000, Vidoe Game Systems & Games 500, DVD Player 20)			100% of fair market value, up to any applicable statutory limit		
Line from Schedule A/B: 6.2					

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 3

Debtor 1
Debtor 2
David W Meints
Elizabeth M Meints

Case number (if known)

				-
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Appliances at the debtor(s) residence	\$560.00	•	\$560.00	11 U.S.C. § 522(d)(3)
(Washer & Dryer 150, Refrigerator 200, Stove 50, Microwave 10, Misc. Kitchen Items 150) Line from Schedule A/B: 6.3			100% of fair market value, up to any applicable statutory limit	
Lawn Mower 10, Tools 500, Patio Set 75, Grill 20 at the debtor(s)	\$605.00	-	\$605.00	11 U.S.C. § 522(d)(3)
residence Line from <i>Schedule A/B</i> : <b>6.4</b>			100% of fair market value, up to any applicable statutory limit	
2 Sets of China at the debtor(s)	\$2,500.00		\$2,500.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: <b>8.1</b>			100% of fair market value, up to any applicable statutory limit	
Hunting Rifle at the debtor(s) residence	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 9.1			100% of fair market value, up to any applicable statutory limit	
Clothing at the debtor(s) residence Line from Schedule A/B: 11.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
			100% of fair market value, up to any applicable statutory limit	
Diamond Ring Line from Schedule A/B: 12.1	\$10,000.00		\$3,100.00	11 U.S.C. § 522(d)(4)
			100% of fair market value, up to any applicable statutory limit	
Diamond Ring Line from Schedule A/B: 12.1	\$10,000.00		\$6,900.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
2 Checking Accounts/ 1 Savings Account	\$5,358.00		\$5,358.00	11 U.S.C. § 522(d)(5)
US Bank Line from <i>Schedule A/B</i> : <b>17.1</b>			100% of fair market value, up to any applicable statutory limit	
<b>401(k)</b> Line from <i>Schedule A/B</i> : <b>21.1</b>	\$5,900.00		\$5,900.00	11 U.S.C. § 522(d)(10)(E)
			100% of fair market value, up to any applicable statutory limit	
401(k) Husband Line from <i>Schedule A/B</i> : 21.2	\$26,000.00		\$26,000.00	11 U.S.C. § 522(d)(12)
			100% of fair market value, up to any applicable statutory limit	
Employer provided term life policy Line from Schedule A/B: 31.1	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
Ello Hom Obligadio PVD. VIII			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

	otor 1 otor 2	David W Meints Elizabeth M Meints	Case number (if known)	
3.	•	you claiming a homestead exemption of more than \$155,675? ject to adjustment on 4/01/16 and every 3 years after that for cases filed on or	after the date of adjustment.)	
		No		
		Yes. Did you acquire the property covered by the exemption within 1,215 days	before you filed this case?	
		□ No		
		☐ Yes		

Fill in this informa	tion to identify you	r case:				
Debtor 1	David W Meints					
	First Name	Middle Name	Last Name			
Debtor 2	Elizabeth M Me					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	ruptcy Court for the:	EASTERN DISTRICT OF WISC	ONSIN			
Case number					•	
(if known)					☐ Check	if this is an
					ameno	led filing
Official Form	106D					
		Who Have Claims S	Secure	d by Property		12/15
Scriedule L	o. Creditors	Wild Have Claims	<del>Jecui e</del>	d by Froperty	<u>y</u>	12/13
		f two married people are filing together t, number the entries, and attach it to th				
known).		,		, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	
	ave claims secured by					
☐ No. Check the	his box and submit th	is form to the court with your other sch	hedules. You	have nothing else to rep	port on this form.	
Yes. Fill in a	II of the information be	elow.				
Part 1: List All	Secured Claims					
		more than one secured claim, list the cred			Column B	Column C
		a particular claim, list the other creditors ical order according to the creditor's name		Amount of claim  Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 One West I	Bank	Describe the property that secures the	1	\$157,412.00	\$143,300.00	\$14,112.00
Creditor's Name	/alnut Street	2720 N 87th Street Milwauke 53222 Milwaukee County Value based on 2015 assess value As of the date you file, the claim is: Capply.	ed			
Pasadena,	CA 91101	☐ Contingent				
Number, Street, C	City, State & Zip Code	Unliquidated				
<b>14</b> 11 - 41 - 1 1 4		Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.		a		
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as m car loan)	iorigage or sec	curea		
■ Debtor 1 and Debt	tor 2 only	☐ Statutory lien (such as tax lien, mech	hanic's lien)			
☐ At least one of the		☐ Judgment lien from a lawsuit				
Check if this clair community debt		Other (including a right to offset)	Mortgag	je		
Date debt was incur	red	Last 4 digits of account numb	er			
Add the dollar valu	ue of your entries in C	olumn A on this page. Write that numb	er here:	\$157,41	2.00	
If this is the last pa Write that number		the dollar value totals from all pages.		\$157,41	2.00	
		5 <del>5</del>				
		r a Debt That You Already Listed				
trying to collect from	n you for a debt you o r any of the debts that ot fill out or submit th	e notified about your bankruptcy for a we to someone else, list the creditor in t you listed in Part 1, list the additional iis page.	Part 1, and t	hen list the collection ag	ency here. Similarly, if y	ou have more
Ceterus M		Or	n which lir	ne in Part 1 did you	enter the creditor	?
14523 SW	Millikan Way					2.1
Beaverton	, OR 97005	La	ıst 4 digits	of account number	er	

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debtor 1	David W Meints	S		Case number (if know)		
	First Name	Middle Name	Last Name			
Debtor 2	Elizabeth M Me	eints				
	First Name	Middle Name	Last Name			
J.	ame Address Peterman Legal Group, LTD 55 Bishops Way, Suite 100 rookfield, WI 53005			On which line in Part 1 did you enter the creditor?  Last 4 digits of account number	2.1	

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Debtor 1 David W Moints   Debtor 2 David W Moints   Mode Name   Last Name	Elli in this intern					Ī			
Debtor 2 Elizabeth M Meints (Records At 1990)  Pers Nove    Elizabeth M Meints   Last Nove   Last Nove   Last Nove   Check If this is an amended filing   Check If this is an is a facility of this is a claim has both priority and comp			ase:			1			
Debtor 2   Elizabeth M Meints   Last Name	Debtor 1		Middle Name	Last Name					
United States Bankruptcy Court for the:  EASTERN DISTRICT OF WISCONSIN  Case number  (Il trover)  Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Be a complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on the leases that could result in a claim. Also list executory contracts on the leases that could result in a claim. Also list executory contracts on Schedule AB: Property Official Form 160A(B) and on one schedule of Executory Contracts on Schedule AB: Property Official Form 160A(B) and on one schedule of Executory Contracts on Schedule AB: Property Official Form 160A(B) and on one schedule of Executory Contracts on Schedule AB: Property Official Form 160A(B) and on one schedule of Executory Contracts and the laster of Schedule Contracts on the last and Schedule Contracts on the last AB: Property Official Form 160A(B) and one of the last Part. On the top of any additional pages, write your name and case number (if however) the property of the last Part. On the top of any additional pages, write your name and case number (in Nova property unsecured claims. Is a creditor has more than one priority unsecured claims. For each claim page of Part 1. If more than one creditor holds a particular claim, list the creditor some light in Contract that the property unsecured claims. If a creditor some light in the case of both both property and responsible, list the claims for a contract and pages of Part 1. If more than one creditor holds a particular claim, list the creditors from the property unsecured claims. If out the Contract Page of Part 1. If more than one creditor holds a particular claim, list the creditors in the instruction bookst.  In a special property of the priority unsecured claims. If out the Contract Page of Part 1. If more than one creditor holds a particular claim, li	Debtor 2			<u> </u>					
Case number   Check if this is an amended filling    Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims   12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to preventive protection of the contracts or inception desses that could result in a claim. Asso list accuratory contracts on Schedule AR: Property (Official Form 106A0) and on Schedule of Executory Contracts and Unexpired Lasses (Official Form 106A0). Do not include any creditors with partially secured claims. In a chief of Schedule AR: Property (Official Form 106A0) and on Schedule AR: Property (Official Form 106A0).  2. Lest all of your priority unsecured claims against you?  2. Lest all of your priority unsecured claims against your property (Official Form 106A0). In a schedule AR: Property (Official Form 106A0). In a schedule AR	(Spouse if, filing)			Last Name					
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims. List to ether party to prevent the property of the sealth of the committee of the property of the cells in a claim. Also blie securitory contracts or of Schedule AB: Property (Official Form 106A/B) and on schedule of: Executory Contracts and Unexpired Leases (Official Form 106C). Do not include any creditors with partially secured claims that are the communication Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and also number (if shore).  PRINTIE List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, dentify what type of claim its. If a claim has both priority and nonpriority and n	United States Ba	nkruptcy Court for the:	EASTERN DISTRICT C	)F WISCONSIN					
Official Form 106E/F Schedule E/F; Creditors Who Have Unsecured Claims  12/15  Be a complete and ocurate as possible. Use Part 1 for creditors with PRORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on shedule ABE. Property (Official Form 106AR) and on the footnet country contracts of unexpired leases that could result in a claim. Also list executory contracts and the property of the party to my contracts or unexpired leases that could result in a claim. Also list executory contracts on shedule ABE. Property (Official Form 106AR) and on the footnet country of the party to my contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule ABE. Property (Official Form 106AR) and on the footnet country and property in the party in the party in the party in the party in the continuation of the footnets	Case number								
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Bo as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to present on complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to present on some professions of the party to present on some professions of the party to present on the party of the party to present on the party of the party to present on the party of							amende	ed filing	
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NOMPRIORITY claims. List the other party to my executory contracts or unexplored leases that could result in a claim. Also list executory contracts or Schedule AR: Property (Official Form 1086) and on Schedule AR: Property (Official Form 1086) and Schedu	Official Fo	rm 106E/F							
any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB. Property (Official Form 106AB) and on though any redictors with partially secured claims that are itsed in Schedule 6: Executory Contracts on Memory of the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and rease number (if known).    Tart	Schedule	E/F: Creditors	Who Have Uns	ecured Claim	S			1	2/15
Yes   2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim is is. If a claim has both priority and unopriority amounts, list that claim here and show both priority and unopriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim. list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)    Total claim	D: Creditors Who I the Continuation F case number (if kn Part 1: List A	Have Claims Secured by Pro Page to this page. If you hav lown). All of Your PRIORITY Uns	perty. If more space is need to information to report secured Claims	eded, copy the Part you n	eed, fill it out, number th	e entries in t	the boxes	on the lef	t. Attach
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim is listed, identify what type of claim is a light a claim has both priority and nonpriority amounts. As much as possible, list the claim so in alphabetical order according to the creditor's name. If, you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  (For an explanation of each type of claim, see the instruction booklet.)  (For an explanation of each type of claim, see the instruction booklet.)  (For an explanation of each type of claim, see the instruction booklet.)  (For an explanation of each type of claim, see the instruction booklet.)  (For an explanation of each type of claim, see the instruction booklet.)  (For an explanation of each type of claim, see the instruction booklet.)  (For an explanation of each type of claim, see the instruction booklet.)  (For an explanation of each type of claim, see the instruction booklet.)  (For an explanation of each type of claim, see the instruction booklet.)  (For an explanation of each type of claim, see the instruction booklet.)  (For an explanation of each type of claims, see the instruction booklet.)  (For an explanation of each type of claims, see the instruction booklet.)  (For an explanation of each type o	□ No. Go	to Part 2.							
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Wisconsin Department of Revenue  Last 4 digits of account number \$ 600.00 \$ 600.00 \$ \$	2. List all of y listed, iden much as po	tify what type of claim it is. If a ossible, list the claims in alpha	claim has both priority and labetical order according to the	nonpriority amounts, list than ne creditor's name. If you ha	at claim here and show bo ave more than two priority	th priority and	l nonpriori	ty amounts.	. As
Revenue Last 4 digits of account number \$ 600.00 \$ 600.00 \$ \$0.00  Priority Creditor's Name Special Procedures Unit PO Box 8901 Madison, WI 53708-8901 Number Street City State Zip Code  Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Domestic support obligations No Taxes and certain other debts you owe the government Debtor Specify Income Tax  Part 2: List All of Your NONPRIORITY Unsecured Claims  So do 0.00 \$ 600.00 \$ \$0.00  \$ \$0.	(For an exp	planation of each type of claim	, see the instructions for this	form in the instruction boo	,	•		•	ity
Priority Creditor's Name Special Procedures Unit PO Box 8901 Madison, WI 53708-8901 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Disputed At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Domestic support obligations Taxes and certain other debts you owe the government Dither. Specify Income Tax  Part 2: List All of Your NONPRIORITY Unsecured Claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules.	2.1 Wiscor	nsin Department of							
Special Procedures Unit PO Box 8901 Madison, WI 53708-8901 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 tleast one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Domestic support obligations No Taxes and certain other debts you were intoxicated Other. Specify Income Tax  Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims to five toe for this part. Submit this form to the court with your other schedules.			Last 4 digits of acc	count number	\$ 600.00	\$	600.00	\$	\$0.00
Number Street City State Zip Code  As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Disputed  At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Domestic support obligations No Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Income Tax  Part 2: List All of Your NONPRIORITY Unsecured Claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules.	Specia PO Bo	I Procedures Unit x 8901	When was the deb	t incurred? 2010		_			
Debtor 1 only Debtor 2 only Debtor 2 only Disputed Type of PRIORITY unsecured claim: Community debt Is the claim subject to offset? Domestic support obligations No Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Income Tax  Part 2: List All of Your NONPRIORITY Unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules.			As of the date you	file, the claim is: Check a	all that apply				
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Income Tax  Part 2: List All of Your NONPRIORITY Unsecured Claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules.			☐ Contingent						
At least one of the debtors and another  Check if this claim is for a community debt Is the claim subject to offset?  No  Claims for death or personal injury while you were intoxicated  Claims for death or personal injury while you were intoxicated  Claims for death or personal injury while you were intoxicated  Content Specify  Income Tax   Part 2: List All of Your NONPRIORITY Unsecured Claims  3. Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.			☐ Unliquidated						
Type of PRIORITY unsecured claim:  Check if this claim is for a community debt Is the claim subject to offset?  No  Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Income Tax  Part 2: List All of Your NONPRIORITY Unsecured Claims  3. Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.	■ Debto	r 1 and Debtor 2 only	☐ Disputed						
Community debt Is the claim subject to offset?  No  Taxes and certain other debts you owe the government  Claims for death or personal injury while you were intoxicated  Other. Specify  Income Tax  List All of Your NONPRIORITY Unsecured Claims  3. Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.	☐ At leas	st one of the debtors and anot							
No Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Income Tax  Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.			Type of PRIORITY	unsecured claim:					
Claims for death or personal injury while you were intoxicated  Other. Specify  Income Tax  List All of Your NONPRIORITY Unsecured Claims  3. Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.	Is the cla	im subject to offset?	☐ Domestic suppo	rt obligations					
Other. Specify Income Tax  Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.	■ No		Taxes and certa	in other debts you owe the	government				
Income Tax  List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.	☐ Yes		☐ Claims for death	or personal injury while yo	ou were intoxicated				
Part 2: List All of Your NONPRIORITY Unsecured Claims  3. Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.			☐ Other. Specify					-	
3. Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.				Income Tax					
☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.	Part 2: List A	II of Your NONPRIORITY	Unsecured Claims						
	3. Do any cre	editors have nonpriority uns	secured claims against you	1?					
■ Yes.	☐ No. You	u have nothing to report in this	part. Submit this form to the	court with your other sche-	dules.				
	Yes.								

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 5

Debtor 1 David W Meints
Debtor 2 Elizabeth M Meints

Case number (if know)

Page of Part 2.		Total c	laim
Affiliated Dermatologists	Last 4 digits of account number	\$	129.0
Priority Creditor's Name 2300 North Mayfair Road Suite 855 Milwaukee, WI 53226	When was the debt incurred? 2011		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
■ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify Medical Services	_	
Great Lakes Higher Education	Last 4 digits of account number	\$	65,388.0
Priority Creditor's Name Servicing Corporation 2401 International Lane Madison, WI 53704-2193	When was the debt incurred? 2011		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
Yes	■ Other. Specify  Student Loan- Debtor has been advised that debt is non-dischargable.	_	
Health Payment Systems, Inc.	Last 4 digits of account number	\$	4,718.0
Priority Creditor's Name c/o McDorman Law Office 2923 Marketplace Drive, Ste 100	When was the debt incurred?		
Madison, WI 53719  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		

Debtor 1 David W Me Debtor 2 Elizabeth M		Case number (if know)		
Who incurred the	debt? Check one.	□ Contingent		
Debtor 1 only		- Contingent		
Debtor 2 only		☐ Unliquidated		
■ Debtor 1 and De	htor 2 only	☐ Disputed		
	ne debtors and another	Type of NONPRIORITY unsecured claim:		
Check if this cla	aim is for a community	☐ Student loans		
debt Is the claim subjec	et to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No		☐ Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes		■ Other. Specify Medical Services		
St Joseph's En		Last 4 digits of account number	\$	704.00
Priority Creditor's N 75 REmitt Driv Chicago, IL 60	re #1574	When was the debt incurred? 2011		
Number Street City		As of the date you file, the claim is: Check all that apply		
Who incurred the o	debt? Check one.	☐ Contingent		
Debtor 2 only		☐ Unliquidated		
■ Debtor 1 and De	ebtor 2 only	☐ Disputed		
☐ At least one of the	ne debtors and another	Type of NONPRIORITY unsecured claim:		
Check if this cl	aim is for a community	☐ Student loans		
Is the claim subjec	et to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No		$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts		
Yes		Other. Specify  Medical Services		
4.5 WE Energies		Last 4 digits of account number	\$	1,100.00
Priority Creditor's N 333 W Everett	St., Rm A130	When was the debt incurred? 2011		
Milwaukee, W Number Street City		As of the date you file, the claim is: Check all that apply		
Who incurred the	debt? Check one.	☐ Contingent		
Debtor 2 only		☐ Unliquidated		
■ Debtor 1 and De	ebtor 2 only	☐ Disputed		
	ne debtors and another	Type of NONPRIORITY unsecured claim:		
Check if this cladebt	aim is for a community	☐ Student loans		
Is the claim subjec	et to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No		☐ Debts to pension or profit-sharing plans, and other similar debts		
Yes		■ Other. Specify Utility Services	_	
4.6 Wheaton Fran	ciscan	Last 4 digits of account number	\$	573.00

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 5

Priority Creditor's Name

Debtor 2 El	izabeth M Meints		Case n	umber (if know)				
	Box 5434 Dept 0027 ol Stream, IL 60197	When was the debt incurred?	2011					
Numb	oer Street City State Zlp Code	As of the date you file, the claim	is: Check all	that apply				
_ `	incurred the debt? Check one. ebtor 1 only	☐ Contingent						
	ebtor 2 only	☐ Unliquidated						
■ D	ebtor 1 and Debtor 2 only	☐ Disputed						
☐ At	t least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
■ C debt	heck if this claim is for a community	☐ Student loans						
Is the	e claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
■ N	0	☐ Debts to pension or profit-shari	ng plans, and	d other similar debts				
□ Ye	es	■ Other. Specify Medic	al Servic	es				
Part 3: Li	st Others to Be Notified About a Do	ebt That You Already Listed						
Use this pag is trying to o have more t	e only if you have others to be notified collect from you for a debt you owe to han one creditor for any of the debts t any debts in Parts 1 or 2, do not fill ou	d about your bankruptcy, for a debt the someone else, list the original credito hat you listed in Parts 1 or 2, list the ac	in Parts 1 c	or 2, then list the colle	ection agency here	e. Similarly, if you		
Name Addı		On which entry in Part 1 or						
Armor Sys I 700 Kiefe		Line 4.1 of (Check one):		: Creditors with F	•			
Zion, IL 60		Loct 4 digits of account nu		: Creditors with N	Nonpriority ons	ecured Claims		
		Last 4 digits of account nui	IIDei					
	Regional Medical	On which entry in Part 1 or Part2 did you list the original creditor?  Line 4.6 of (Check one):   Part 1: Creditors with Priority Unsecured Claims						
PO Box 68	-9510 -, WI 53268	■ Part 2: Creditors with Nonpriority Unsecured Claims						
viiiwaukee	, **1 33200	Last 4 digits of account nur	mber					
Name Addı	ess	On which entry in Part 1 or	Part2 did	l you list the orig	ginal creditor?	?		
	ection Serv. oughton Rd.	Line 4.6 of (Check one):		: Creditors with F	•			
vadison, \			■ Part 2	: Creditors with N	Nonpriority Uns	ecured Claims		
•		Last 4 digits of account nur	mber					
Name Addı		On which entry in Part 1 or						
United Col PO Box 14	lectio Bureau	Line 4.4 of (Check one):		: Creditors with F	•			
	1 43614-0190			: Creditors with N	Nonpriority Uns	ecured Claims		
		Last 4 digits of account nur	nber					
Part 4: Ad	dd the Amounts for Each Type of L	Insecured Claim						
	nounts of certain types of unsecured c ecured claim.	laims. This information is for statistica	l reporting p	ourposes only. 28 U.S	S.C. §159. Add the	amounts for each		
	6a. Domestic support obligation	ons	6a.	Total claim	0.00			
Total claims	-		6h					
from Part 1		ots you owe the government al injury while you were intoxicated	6b. 6c.	\$ 	0.00			
		nsecured claims. Write that amount here		\$	0.00			
						7		
	6e. <b>Total.</b> Add lines 6a through 6	d.	6e.	\$	600.00			
	6f. Student loans		6f.	Total Claim	0.00			

Official Form 106 E/F

Total claims

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 5

Debtor 1 David W Meints Debtor 2 Elizabeth M Meints

from	Part 2	
110111	I alt Z	

- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
  Debts to pension or profit-sharing plans, and other similar debts
- 6h.
- Other. Add all other nonpriority unsecured claims. Write that amount 6i.
- Total. Add lines 6f through 6i.

Case number (if know)

6g.	\$ 0.00
6h.	\$ 0.00
6i.	\$ 72,612.00

72,612.00

Fill in this infor	mation to identify your	case:		
Debtor 1	David W Meints			
	First Name	Middle Name	Last Name	
Debtor 2	Elizabeth M Meir	nts		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F WISCONSIN	
Case number (if known)				☐ Check if this is an
				☐ Check if this amended fil

## Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

1	Person or	company with	whom you have the	contract or lease	State what the contract or lease is for
.1		Name, Number	r, Street, City, State and ZiP	Code	
	Name				<del>_</del>
	Number	Street			
	City		State	ZIP Code	<del>_</del>
.2	Name				<u> </u>
-	Number	Street			<u> </u>
	City		State	ZIP Code	<del>_</del>
2.3	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4	Name				<u> </u>
-	Number	Street			<u> </u>
-	City		State	ZIP Code	_
.5	Name				
	IVAIIIC				
	Number	Street			<del>_</del>
	City		State	ZIP Code	_

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Fill in this info	rmation to identify your	case:		
Debtor 1	David W Meints			
<b>5</b> 1 4 6	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Elizabeth M Mei	Middle Name	Last Name	
United States B	ankruptcy Court for the:	EASTERN DISTRICT OF	WISCONSIN	
	., .,			
Case number (if known)				☐ Check if this is an
				amended filing
Official Fo	orm 106H			
	H: Your Cod	lebtors		12/15
<del></del>	3 111 1 Gai GGa			1210
and number the case number (if	e entries in the boxes or f known). Answer every	the left. Attach the Addition	al Page to this page	ore space is needed, copy the Additional Page, fill it out, and the top of any Additional Pages, write your name and a codebtor.
■ No				
☐ Yes				
		u lived in a community prope New Mexico, Puerto Rico, Tex		<ul> <li>(Community property states and territories include Arizona, Wisconsin.)</li> </ul>
□ No. Go t	o line 3			
		use, or legal equivalent live with	vou at the time?	
		,	•	
□ N				
<b>■</b> Y	es.			
	In which community stat	e or territory did you live?	-NONE-	. Fill in the name and current address of that person.
	Name of your spouse, former s Number, Street, City, State & Z			
line 2 agai	n as a codebtor only if the edule E/F (Official Form	hat person is a guarantor or	cosigner. Make sure	f your spouse is filing with you. List the person shown in e you have listed the creditor on Schedule D (Official For se Schedule D, Schedule E/F, or Schedule G to fill out
	mn 1: Your codebtor  Number, Street, City, State and	ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				Schedule D, line
Name				Schedule E/F, line
				☐ Schedule G, line
Numb City	er Street	State	ZIP Code	_
3.2				☐ Schedule D, line
Name	)			☐ Schedule E/F, line
				☐ Schedule G, line
Numb	er Street			_
City		State	ZIP Code	

Fill	in this information to identify your ca	se:								
Del	otor 1 David W Me	eints								
	otor 2 Elizabeth N	Meints				_				
Uni	ted States Bankruptcy Court for the:	EASTERN DISTRICT	OF WIS	CONSIN		_				
(If kr	se number nown)		-				Check if this is:  An amende  A suppleme	d filing ent show	ing postpetition chapter lowing date:	13
0	fficial Form 106I						MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome							12	/15
atta	use. If you are separated and you ch a separate sheet to this form.  t1: Describe Employment  Fill in your employment		nal page	es, write you			ase number (if kn	own). A	nswer every question	_
••	information.		Debto				Debtor 2	or non	-filing spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed			■ Emplo	•			
	information about additional employers.		☐ Not employed			☐ Not employed				
		Occupation	Senio	or Designe	r		Sales			
	Include part-time, seasonal, or self-employed work.	Employer's name	Dyne	X			Nordst	rom In	c.	
	Occupation may include student of homemaker, if it applies.	r Employer's address		Capitol Driv aukee, WI 5			1700 Se Suite 1 Seattle	000	Avenue 8101	
D	Oliva Dataila Albart Ma	How long employed th	nere?	14 year	s			1 mon	ths	
<b>Esti</b> unle	mate monthly income as of the d ss you are separated. u or your non-filing spouse have mo	ate you file this form. If y								
spac	ce, attach a separate sheet to this fo	m.								
							For Debtor 1		Debtor 2 or filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly, or				2.	\$	5,968.00	\$	1,933.00	
3.	Estimate and list monthly over	ime pav.			3.	+\$	0.00	+\$	0.00	

Official Form 106I Schedule I: Your Income Case 16-22953-beh Page 28 of 60

Calculate gross Income. Add line 2 + line 3.

5,968.00

1,933.00

page 1

Case number (if known)

5.		y line 4 here		4.				ling spouse	
5.	5a.	all manuall de doublemen		4.	\$	5,968.00	\$	1,933.00	
O.	5a.	all payroll deductions:							
		Tax, Medicare, and Social Security	deductions	5a.	\$	991.00	\$	177.00	
		Mandatory contributions for retiren		5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement	•	5c.	\$-	0.00	\$	0.00	
	5d.	Required repayments of retirement	•	5d.	\$-	0.00	\$	0.00	
	5e.	Insurance	Turia rourio	5e.	\$	551.00	\$	0.00	
	5f.	Domestic support obligations		5f.	\$	0.00	\$	0.00	
	5g.	Union dues		5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify: HSA		5h.+	· -		+ \$	0.00	
		401(k)			\$	0.00	\$	116.00	
		Roth 401(k)			\$	0.00	\$	116.00	
6	٧٩٩	the payroll deductions. Add lines 5a+	Eh Eo Ed Eo Ef Ea Eh		\$				
		• •	-	6.	· —	1,622.00	\$	409.00	
7.	Caic	ulate total monthly take-home pay. S	Subtract line 6 from line 4.	7.	\$	4,346.00	\$	1,524.00	
8.	List a	all other income regularly received:  Net income from rental property an	d from operating a business,						
		profession, or farm Attach a statement for each property a	and husiness showing gross						
		receipts, ordinary and necessary busin							
		monthly net income.	, , , , , , , , , , , , , , , , , , , ,	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends		8b.	\$	0.00	\$	0.00	
	8c.	regularly receive	a non-filing spouse, or a dependent						
		Include alimony, spousal support, child	d support, maintenance, divorce	0 -	Φ.		Φ.		
	0.1	settlement, and property settlement.		8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation		8d.	\$	0.00	\$	0.00	
	8e.	Social Security		8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that y Include cash assistance and the value that your receive, such as food stamps	(if known) of any non-cash assistance (benefits under the Supplemental						
		Nutrition Assistance Program) or hous Specify:	sing subsidies.	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income		— 8g.	\$	0.00	\$	0.00	
	og.		Contributions from Children for	og.	<b>–</b>	0.00	<b>*</b>	0.00	
	8h.		Cell Phones	8h.+	\$	75.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c-	+8d+8e+8f+8g+8h.	9.	\$	75.00	\$	0.00	
10.	Calc	ulate monthly income. Add line 7 + lin	ne 9.	10. \$	4	,421.00 + \$	1,52	4.00   =   \$ 5,9	45.00
	Add 1	the entries in line 10 for Debtor 1 and De	ebtor 2 or non-filing spouse.						
11.	Inclu		e expenses that you list in Schedule oner, members of your household, your de		ts, your	roommates, and	t		
	Do no Spec		in lines 2-10 or amounts that are not ava	ailable to	pay ex	penses listed in	Schedule —	e <i>J.</i> 11. +\$	0.00
			e <b>10 to the amount in line 11.</b> The resulules and Statistical Summary of Certain						45.00
								Combined monthly inc	come
13.	Do y □	ou expect an increase or decrease wi	ithin the year after you file this form?	•				•	

Pursuant to In re Hilgendorf, 2011 Bankr. LEXIS 429, Debtors have deducted their actual income tax liability on Line 4a above, rather than income taxes withheld, in addition to their FICA withholding. Therefore, they are entitled to retain any net federal and state income tax refunds they receive during the remaining term of the plan, even though their income is below the median. This is reflected in the amended plan filed with this amended budget.

Official Form 106I

Fill	in this informa	ation to identify you	ur case:						
Deb	tor 1	David W Me	ints			Cł	neck if	this is:	
Dah	tor 2	Eli al ad M						amended filing	:
	tor 2 buse, if filing)	Elizabeth M	Meints					upplement snow enses as of the f	ing postpetition chapter 13 following date:
(0)	,g)								
Unite	ed States Bank	cruptcy Court for the	: EASTE	RN DISTRICT OF WISCO	NSIN		MN	I / DD / YYYY	
	e number nown)								
Of	fficial Fo	orm 106J							
So	chedule	J: Your l	Exper	ises					12/15
Be a info (if k	as complete ormation. If n nown). Ansv	and accurate as nore space is new wer every question	possible. eded, atta on.	If two married people are ch another sheet to this fo					
Part 1.	t 1: Desc Is this a joi	ribe Your House	hold						
١.	□ No. Go t								
		es Debtor 2 live i	n a senara	ate household?					
	_ 100. <b>5</b> 0.		u copui	no modeomora i					
			t file Offici	al Form 106J-2, <i>Expenses</i> i	for Senarate Househ	old of Deh	ntor 2		
_				ar 1 01111 1000 2, Expenses 1	or ocparate mousem	JIG OI DOL	7.O1 Z.		
2.	Do you hav	ve dependents?	☐ No						
	Do not list Debtor 2.	Debtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		_	Dependent's age	Does dependent live with you?
	Do not state	e the							□ No
	dependents	names.			Son			16	Yes
					Da al tar (FT (	<b>.</b>		0.4	□ No
					Daughter (FT S	Student	<u>)                                    </u>	21	■ Yes
					Son (FT Stude	nt)		21	□ No ■ Yes
					0011 (1 1 01000	,			■ res
									☐ Yes
3.	•	penses include		No					
		of people other th nd your depende		Yes					
				_					
Esti exp	imate your e	a date after the b	our bankrı	y Expenses uptcy filing date unless yo r is filed. If this is a supple					
valu	ue of such as	ssistance and ha		government assistance if yed it on <i>Schedule I:</i> Your I				Your expe	enses
(OII	ficial Form 1	001.)					_	тош охро	
4.		or home owners nd any rent for the		ses for your residence. Industrial	clude first mortgage	4.	\$_		1,393.71
	If not inclu	ded in line 4:							
	4a. Real	estate taxes				4a.	\$		0.00
	4b. Prope	erty, homeowner's	, or renter's	sinsurance		4b.	· : —		0.00
		e maintenance, rep				4c.	· · ·		100.00
5.		eowner's associati		ominium dues o <b>ur residence,</b> such as hom	ne equity loans	4d.	\$ \$		0.00
J.	AuditiOlidi	mortgage payine	onto for yo	ui residence, such as non	ic equity italis	ე.	φ		0.00

Schedule J: Your Expenses Official Form 106J page 1

**David W Meints** Debtor 1 Debtor 2 **Elizabeth M Meints** Case number (if known) **Utilities:** Electricity, heat, natural gas 300.00 6a. \$ 6a. Water, sewer, garbage collection 6b. \$ 6b. 75.00 Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 377.00 6c. 6d. Other. Specify: 6d. \$ 0.00 Food and housekeeping supplies 7. \$ 900.00 Childcare and children's education costs 8. \$ 0.00 Clothing, laundry, and dry cleaning 9. \$ 130.00 Personal care products and services 10. \$ 200.00 Medical and dental expenses 11. 100.00 Transportation. Include gas, maintenance, bus or train fare. 325.00 12. \$ Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 100.00 14. Charitable contributions and religious donations 14. \$ 0.00 Do not include insurance deducted from your pay or included in lines 4 or 20. 0.00 15a. Life insurance 15a. \$ 15b. Health insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 120.00 15d. Other insurance. Specify: 15d. \$ 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 Your payments of alimony, maintenance, and support that you did not report as 0.00 deducted from your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. \$ 0.00 Other payments you make to support others who do not live with you. 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 0.00 20a. \$ 20b. \$ 20b. Real estate taxes 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: Gifts 21. +\$ 75.00 22. Calculate your monthly expenses 22a. Add lines 4 through 21. \$ 4,195.71 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ 22c. Add line 22a and 22b. The result is your monthly expenses. 4,195.71 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 5,945.00 23b. Copy your monthly expenses from line 22c above. 23b. -\$ 4,195.71 Subtract your monthly expenses from your monthly income. \$ 1.749.29 The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No. Explain here: ☐ Yes.

Official Form 106J Schedule J: Your Expenses page 2

Fill in this inform	mation to identify your c	ase:		
Debtor 1	David W Meints			
	First Name	Middle Name	Last Name	—
Debtor 2	Elizabeth M Mein	ts		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	WISCONSIN	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Forr	m 106Dec			
		n Individual	Debtor's Schedule	<b>9S</b> 12/15
If two married pe	eople are filing together,	both are equally respons	ble for supplying correct information	n.
You must file this	s form whenever you file	hankruntov schodulos o	r amended schedules. Making a false	e statement, concealing property, or
				250,000, or imprisonment for up to 20
years, or both. 1	8 U.S.C. §§ 152, 1341, 15	19, and 3571.		, , ,
Sigi	n Below			
Did you pa	y or agree to pay somed	one who is NOT an attorne	y to help you fill out bankruptcy forr	ns?
■ No				
☐ Yes. N	Name of person		. Attach <i>Bankrupto</i> and Signature (Of	cy Petition Preparer's Notice, Declaration, ficial Form 119).
	Ity of perjury, I declare t e true and correct.	hat I have read the summa	ary and schedules filed with this dec	laration and
X /s/ Dav	vid W Meints		X /s/ Elizabeth M Meints	<b>i</b>
David	W Meints		Elizabeth M Meints	
Signatu	re of Debtor 1		Signature of Debtor 2	
Date	April 1, 2016		Date <b>April 1, 2016</b>	

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Best Case Bankruptcy

Fil	I in this inform	nation to identify your	case:			
	ebtor 1	David W Meints				
		First Name	Middle Name	Last Name		
1	ebtor 2 ouse if, filing)	Elizabeth M Mei	nts Middle Name	Last Name		
	, 0,					
Un	lited States Bar	kruptcy Court for the:	EASTERN DISTRICT OF	WISCONSIN		
	nse number					heck if this is an mended filing
St Be info	as complete a ormation. If m	of Financial		e filing together, both are ed	ankruptcy qually responsible for supply additional pages, write your r	
			rital Status and Where You	Lived Before		
1.	wnat is your	current marital statu	S?			
	<ul><li>■ Married</li><li>□ Not mar</li></ul>	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than w	where you live now?		
	■ No □ Yes. Lis	t all of the places you liv	ved in the last 3 years. Do not i	nclude where you live now.		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 there	lived Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
<b>3.</b> sta					y property state or territory? Texas, Washington and Wisco	
	□ No					
	Yes. Ma	ke sure you fill out Sch	edule H: Your Codebtors (Offi	cial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the total	l amount of income you	nployment or from operating received from all jobs and all b lave income that you receive to	ousinesses, including part-time		ar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$19,500.00	■ Wages, commissions, bonuses, tips	\$4,900.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

				Debtor 1		Debtor 2			
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)	
For last calendar year: (January 1 to December 31, 2015)		■ Wages, commissions, bonuses, tips	\$65,759.00	■ Wages, combonuses, tips	nmissions,	\$21,815.00			
				☐ Operating a business		☐ Operating a	business		
		dar year be December		■ Wages, commissions, bonuses, tips	\$60,905.00	■ Wages, combonuses, tips	nmissions,	\$15,821.00	
				☐ Operating a business		☐ Operating a	business		
5.	Include incother publy you are filible.  List each so the No	come regard c benefit pa ng a joint ca	less of wheth yments; pens se and you h	ne during this year or the two ner that income is taxable. Examplions; rental income; interest; divave income that you received tog norme from each source separately	oles of other income are aling idends; money collected from gether, list it only once under	m lawsuits; royalties Debtor 1.	; and gambl		
			ta.ioi						
				Debtor 1	0	Debtor 2		0	
				Sources of income Describe below	Gross income (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)	
Ра 6.	-		•	ı Made Before You Filed for E					
<b>o</b> .	□ No.	Neither D	ebtor 1 nor l	's debts primarily consumer or Debtor 2 has primarily consum personal, family, or household p	ner debts. Consumer debts	s are defined in 11 L	J.S.C. § 101	(8) as "incurred by an	
		During the	90 days befo	ore you filed for bankruptcy, did	you pay any creditor a total o	of \$6,225* or more?			
	☐ No. Go to line 7.								
				each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that					
		* Subject	payments	o not include payments for dome to an attorney for this bankrupto t on 4/01/16 and every 3 years a	y case.			. Also, do not include	
	■ Yes.			or both have primarily consur		f \$600 or more?			
		■ No.	Go to line	7.					
		□ Yes		each creditor to whom you paid for domestic support obligations uptcy case.					
	Creditor	s Name and	d Address	Dates of payme	nt Total amount	Amount you still owe	Was this	payment for	
7.	Insiders in which you business y	clude your ro are an office ou operate a	elatives; any er, director, p	r bankruptcy, did you make a general partners; relatives of any erson in control, or owner of 20% prietor. 11 U.S.C. § 101. Include	payment on a debt you ov general partners; partnersh or more of their voting seco	wed anyone who wips of which you are urities; and any mar	e a general p naging agent	eartner; corporations of , including one for a	
		Name and		Dates of payme	nt Total amount	Amount you	Reason f	or this payment	
				_ also a. paymo	paid	still owe			
8	Within 1 v	ear before	you filed fo	r hankruntov, did vou make a	·		count of a	debt that benefited	

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Official Form 107

Best Case Bankruptcy

page 2

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	botor 1 David W Meints botor 2 Elizabeth M Meints	Cas	Case number (if known)			
	insider? Include payments on debts guaranteed or cosig	ned by an insider.				
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include creditor	
Pa	rt 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury c and contract disputes.					
	□ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	case
	One West Bank FSB vs. David W Meints et al Milwaukee County Case Number 2010CV015024				☐ Pending ☐ On appeal ☐ Concluded	
	Health Payment Systems Inc vs. David Meints Milwaukee County Case Number 2015SC003612				☐ Pending ☐ On appeal ☐ Concluded	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below.  No Yes. Fill in the information below.		ty repossessed, fo	reclosed, garnish	ed, attached, se	eized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened				property
	One West Bank 888 East Walnut Street Pasadena, CA 91101	Single Family Residence Location: 2720 N 87th Street, Milwaukee WI 53222 \$182,000.00				\$182,000.00
		☐ Property was reposses☐ Property was foreclose☐ Property was garnishe	ed.			
		☐ Property was attached	, seized or levied.			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca  No Yes. Fill in the details.		iding a bank or fina	ncial institution, s	set off any amo	unts from your
	Creditor Name and Address	Describe the action the	creditor took	Date a	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an No Yes		ty in the possessio	on of an assignee	for the benefit (	of creditors, a

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

	otor 1 David W Meints otor 2 Elizabeth M Meints		Case number	(if known)				
Par	t 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankru  No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 person  Person to Whom You Gave the Gift and		did you give any gifts with a total value of more the Describe the gifts	nan \$600 per person?  Dates you gave the gifts	Value			
	Address:							
14.	Vithin 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity  No  Yes. Fill in the details for each gift or contribution.							
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value			
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankrup or gambling?  ■ No □ Yes. Fill in the details.  Describe the property you lost and how the loss occurred	Descr	since you filed for bankruptcy, did you lose anyt ibe any insurance coverage for the loss e the amount that insurance has paid. List pending	hing because of theft,  Date of your loss	Value of property			
Par	t 7: List Certain Payments or Transfers		nce claims on line 33 of Schedule A/B: Property.					
	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or pi	eparir	d you or anyone else acting on your behalf pay on a bankruptcy petition? or credit counseling agencies for services required in  Description and value of any property transferred		y to anyone you  Amount of payment			
	Person Who Made the Payment, if Not You Lombardo Law Office 10919 West Bluemound Road Suite 200 Milwaukee, WI 53226 Milwaukee, WI 53226 wendi@lombardolawoffice.com		\$500 Attorney Fees \$310 Filing Fee	3/18/16	\$0.00			
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.  No Yes. Fill in the details.							
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

18.	tran Incl	hin 2 years before you filed for bankrupt isferred in the ordinary course of your be ude both outright transfers and transfers may and transfers that you have already listed on No Yes. Fill in the details.	u <b>sine</b> de as	ess or financial affa s security (such as the	irs?					
	Ad	rson Who Received Transfer dress		Description and vo			payme	ibe any property or ents received or debts n exchange		Date transfer was nade
	Pei	rson's relationship to you								
<ul> <li>Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of beneficiary? (These are often called asset-protection devices.)</li> <li>No</li> </ul>									wl	nich you are a
		Yes. Fill in the details.								
	Na	me of trust		Description and value of the property transferred						Oate Transfer was
<b>Par</b> 20.		List of Certain Financial Accounts, Ins		•	•	•		l in your name, or for you	ır b	enefit, closed,
	Incl	d, moved, or transferred? ude checking, savings, money market, o ses, pension funds, cooperatives, assoc No					eposit;	shares in banks, credit u	nio	ns, brokerage
		Yes. Fill in the details.								
	Ad	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		Last 4 digits of Type of account number instrument			Date account was closed, sold, moved, or transferred			ast balance before closing or transfer
21.		you now have, or did you have within 1 y h, or other valuables?	ear l	before you filed for	bankruptcy, an	ny sa	fe depo	osit box or other deposito	ory	for securities,
		No Yes. Fill in the details.								
		me of Financial Institution dress (Number, Street, City, State and ZIP Code)		Who else had access to it?  Address (Number, Street, City, State and ZIP Code)			scribe 1	the contents		Do you still have it?
22.	Hav	e you stored property in a storage unit o	or pla	ce other than your	home within 1	year	before	you filed for bankruptcy		
		No Yes. Fill in the details.								
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)		Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)			escribe 1	the contents		Do you still have it?
Par	t 9:	Identify Property You Hold or Control	for S	Someone Else						
23.	Do	you hold or control any property that so			de any propert	у уо	u borro	wed from, are storing for	·, o	r hold in trust for
		No								
		Yes. Fill in the details.								
		rner's Name dress (Number, Street, City, State and ZIP Code)		Where is the property? (Number, Street, City, State and ZIP Code)			scribe 1	the property		Value
Par	t 10:	Give Details About Environmental Info	ormat	tion						
For	the p	ourpose of Part 10, the following definition	ons a	pply:						
	Env	rironmental law means any federal, state	, or lo	ocal statute or regu	lation concerni	ing p	ollution	n, contamination, release	s o	f hazardous or

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Official Form 107

Best Case Bankruptcy

page 5

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 David W Meints
Debtor 2 Elizabeth M Meints

Case number (if known)

controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Date of notice Name of site Governmental unit Environmental law, if you Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. ■ No Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the Case Number Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ■ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Debtor 1	David W Meints	
Debtor 2	Elizabeth M Meints	Case number (if known)
bankrupto		e statement, concealing property, or obtaining money or property by fraud in connection with a 00, or imprisonment for up to 20 years, or both.
/s/ David	d W Meints	/s/ Elizabeth M Meints
David W	/ Meints	Elizabeth M Meints
Signature	e of Debtor 1	Signature of Debtor 2
Date A	pril 1, 2016	Date April 1, 2016
_ ′	tach additional pages to Your Statemen	nt of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No		
☐ Yes		
Did you pa	ay or agree to pay someone who is not	an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:								
Debtor 1	David W Meints							
Debtor 2 Elizabeth M Meints (Spouse, if filing)								
United States Ba	ankruptcy Court for the:	Eastern District of Wisconsin						
Case number (if known)								

Checl	Check as directed in lines 17 and 21:										
1	According to the calculations required by this Statement:										
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).										
-	<ol> <li>Disposable income is determined under 11 U.S.C. § 1325(b)(3).</li> </ol>										
	3. The commitment period is 3 years.										
-	4. The commitment period is 5 years.										

☐ Check if this is an amended filing

# Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - ☐ Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.

11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

report for any line, write \$0 in the space.				
			olumn A ebtor 1	 mn B or 2 or filing spouse
2. Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and commission	ns (before all \$_	6,065.66	\$ 1,881.15
3. <b>Alimony and maintenance payments.</b> Do not includ Column B is filled in.	spouse if \$_	0.00	\$ 0.00	
4. All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your household roommates. Include regular contributions from a spous Do not include payments you listed on line 3.	rt. Include regular of the contract of the con	contributions , parents, and	0.00	\$ 0.00
5. Net income from operating a business, profession, or farm	Debtor 1			
Gross receipts (before all deductions)	\$0.00			
Ordinary and necessary operating expenses	-\$ 0.00			
Net monthly income from a business, profession, or fa	ırm \$ <b>0.00</b>	Copy here -> \$	0.00	\$ 0.00
6. Net income from rental and other real property	Debtor 1			
Gross receipts (before all deductions)	\$ 0.00			
Ordinary and necessary operating expenses	-\$ 0.00			
Net monthly income from rental or other real property	\$ 0.00	Copy here -> \$	0.00	\$ 0.00

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 1

15. Calculate your current monthly income for the year. Follow these steps: 7,946.81 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 95.361.72 15b. The result is your current monthly income for the year for this part of the form.

	16a. Fill in the state in which you live.	WI			
	16b. Fill in the number of people in your household.	5			
	16c. Fill in the median family income for your state and si To find a list of applicable median income amounts, instructions for this form. This list may also be available.	go online using the link specified in the se		\$	93,959.00
17.	How do the lines compare?				
	17a. Line 15b is less than or equal to line 16c. O <i>U.S.C.</i> § <i>1325(b)(3)</i> . <b>Go to Part 3.</b> Do NOT				rmined under 11
	17b. Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcuyour current monthly income from line 14 ab	lation of Your Disposable Income (Off			_
art	3: Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)			
3.	Copy your total average monthly income from line 1	1.	\$		7,946.81
	<b>Deduct the marital adjustment if it applies.</b> If you are that calculating the commitment period under 11 U.S.C. § copy the amount from line 13.	married, your spouse is not filing with you	, and you contend		
	19a. If the marital adjustment does not apply, fill in 0 on li	ne 19a.	<b>-</b> \$_		0.00
	19b. Subtract line 19a from line 18.			\$	7,946.81
0.	Calculate your current monthly income for the year.	Follow these steps:	_		
	20a. Copy line 19b			\$	7,946.81
	Multiply by 12 (the number of months in a year).			X	12
	20b. The result is your current monthly income for the ye	ar for this part of the form		\$	95,361.72
	20c. Copy the median family income for your state and si	ze of household from line 16c		\$	93,959.00
	21. How do the lines compare?				
	☐ Line 20b is less than line 20c. Unless otherwis is 3 years. Go to Part 4.	e ordered by the court, on the top of page	1 of this form, check box 3,	The c	ommitment peri
	Line 20b is more than or equal to line 20c. Unl commitment period is 5 years. Go to Part 4.	ess otherwise ordered by the court, on the	top of page 1 of this form, c	heck t	box 4, The
art					
	By signing here, under penalty of perjury I declare that the	·		ect.	
X	/s/ David W Meints David W Meints	X /s/ Elizabeth M Elizabeth M Me			
	Signature of Debtor 1	Signature of Debto			
	Date April 1, 2016 MM / DD / YYYY	Date <b>April 1, 2</b> MM / DD / Y			
	If you checked 17a, do NOT fill out or file Form 122C-2.				

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 3

Page 42 of 60

Fill in this	s information to ide	ntify yo	our (	case:																	
Debtor 1	David W Mei	nts																			
Debtor 2 (Spouse, if	Elizabeth M I	Meints	<b>5</b>							-											
United Sta	tes Bankruptcy Court fo	or the:	_E	Eastern I	District	of Wi	isconsi	in													
Case numb (if known)	oer									-					Checl	k if th	is is a	an am	nende	d filir	ng
Official For		atio	n (	of V	our l	Dic	·noc	sak	ا ماد	lnc	on	20									40/4
	er 13 Calcul																	<u> </u>			12/15
	his form, you will ne ent Period (Official Fo				d copy	of CI	hapter	r 13 S	Staten	ient	of Yo	our C	urren	t Mont	thly ii	ncom	e and	Calcu	lation	of	
is needed,	plete and accurate as attach a separate sho name and case numb	eet to th	his f	form, In																	
Part 1:	Calculate Your Ded	luctions	s fro	om You	ır Incon	ne															
questio	ernal Revenue Servions in lines 6-15. To fi ns in may also be ava	nd the l	IRS	standa	ards, go	o onli	ine usi	ing tl													r the the
if they a	the expense amounts s re higher than the stand any amounts that you s	dards. D	o no	ot includ	de any d	operat	ting exp	pens	es tha	you	subt	racted	d from								
If your e	xpenses differ from mo	onth to m	nont	th, enter	r the ave	erage	expens	se.													
Note: Lii	ne numbers 1-4 are no	t used ir	n this	is form.	These r	numb	ers app	ply to	inforn	natio	n req	uired	by a s	similar f	form (	used ir	n chap	ter 7 d	ases.		
5. <b>Th</b>	e number of people ι	used in	dete	erminir	ng your	r dedu	uction	s fro	m inc	ome	•										
nui	in the number of peop mber of any additional opple in your household.	depende																5			
Nationa	ıl Standards	You mu	ust u	use the	IRS Na	ational	l Stand	lards	to ans	wer	the q	uestio	ons in	lines 6	-7.						
	od, clothing, and oth in the dollar amount for							you e	entere	d in li	ine 5	and th	he IR	S Natio	nal S	tandar	ds,	\$		1,	891.00
the peo	nt-of-pocket health ca e dollar amount for out-opple who are 65 or olde ther than this IRS amou	of-pocke erbecau	et he	ealth car older pe	re. The leople ha	numb ave a l	er of p higher	eople IRS	e is sp allowa	lit inte nce f	o two	cate	gories	peopl	e who	o are u	ınder (	35 and			

Official Form 22C-2

Chapter 13 Calculation of Your Disposable Income

page 1

Debtor 1 Debtor 2

Case number (if known)

People	who are under 65 years of age				
7a.	Out-of-pocket health care allowance per person	\$60			
7b.	. Number of people who are under 65	X <b>5</b> _			
7c.	Subtotal. Multiply line 7a by line 7b.	\$300.00	Copy here=>	\$300.00	
People	who are 65 years of age or older				
7d.	. Out-of-pocket health care allowance per person	\$144_			
7e.	Number of people who are 65 or older	xo			
<b>7</b> f.	Subtotal. Multiply line 7d by line 7e.	\$0.00_	Copy here=>	\$	
7g.	. <b>Total.</b> Add line 7c and line 7f	\$_	300.00	Copy total here=	\$ 300.00
Hous	sing and utilities - Insurance and operating exper sing and utilities - Mortgage or rent expenses				
House To answ Instruct Ho the	sing and utilities - Mortgage or rent expenses wer the questions in lines 8-9, use the U.S. Truste tions for this form. This chart may also be available using and utilities - Insurance and operating expe- e dollar amount listed for your county for insurance and	ee Program chart. To find ble at the bankruptcy cle enses: Using the number	rk's office.		•
House the House	sing and utilities - Mortgage or rent expenses wer the questions in lines 8-9, use the U.S. Truste tions for this form. This chart may also be available using and utilities - Insurance and operating experience dollar amount listed for your county for insurance and tusing and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, first	ee Program chart. To find ble at the bankruptcy cle enses: Using the number d operating expenses.	rk's office.	d in line 5, fill in	•
House Fo answers House H	wer the questions in lines 8-9, use the U.S. Truste tions for this form. This chart may also be available to the distribution of this form. This chart may also be available to the distribution of this form. This chart may also be available to the distribution of the	ee Program chart. To find ble at the bankruptcy cle enses: Using the number d operating expenses. ill in the dollar amount s.	rk's office.  of people you entered	d in line 5, fill in	•
House of answerse House the	wer the questions in lines 8-9, use the U.S. Truste tions for this form. This chart may also be available to the distribution of this form. This chart may also be available to the distribution of this form. This chart may also be available to the distribution of this form. This chart may also be available to the distribution of this form. This chart may also be available to this form. This chart may also be available to the distribution of th	the Program chart. To find the ble at the bankruptcy cle enses: Using the number dispersion operating expenses.  It is the dollar amount in the dollar amoun	rk's office.  of people you entered	d in line 5, fill in	·
House Fo answers House H	wer the questions in lines 8-9, use the U.S. Trusterions for this form. This chart may also be available dollar amount listed for your county for insurance and operating explosing and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, fillisted for your county for mortgage or rent expenses:  Total average monthly payment for all mortgages are To calculate the total average monthly payment, additional contractually due to each secured creditor in the 60	the Program chart. To find the ble at the bankruptcy cle enses: Using the number dispersion operating expenses.  It is the dollar amount in the dollar amoun	rk's office.  of people you entered	d in line 5, fill in	ecified in the separat
House of answerse house of the	wer the questions in lines 8-9, use the U.S. Truste tions for this form. This chart may also be available to basing and utilities - Insurance and operating experience dollar amount listed for your county for insurance and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, fillisted for your county for mortgage or rent expenses:  Total average monthly payment for all mortgages are To calculate the total average monthly payment, additional contractually due to each secured creditor in the 60 bankruptcy. Next divide by 60.	ee Program chart. To find ble at the bankruptcy cle enses: Using the number d operating expenses.  ill in the dollar amount s.  nd other debts secured by d all amounts that are 0 months after you file for	vrk's office.  of people you entered  your home.	d in line 5, fill in	•
House to answer the House the House 9a.	wer the questions in lines 8-9, use the U.S. Truster tions for this form. This chart may also be available to be a dullities - Insurance and operating expressions and utilities - Insurance and operating expressions and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, fillisted for your county for mortgage or rent expenses.  Total average monthly payment for all mortgages are To calculate the total average monthly payment, add contractually due to each secured creditor in the 60 bankruptcy. Next divide by 60.	be Program chart. To find ble at the bankruptcy cle enses: Using the number d operating expenses.  ill in the dollar amount s.  ind other debts secured by d all amounts that are of months after you file for Average monthly payment  \$ 1,393.	your home.	\$ 1,429.00	•
House of answerse house the house of the hou	wer the questions in lines 8-9, use the U.S. Trusterions for this form. This chart may also be available using and utilities - Insurance and operating experience dollar amount listed for your county for insurance and obusing and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, fillisted for your county for mortgage or rent expenses:  Total average monthly payment for all mortgages and To calculate the total average monthly payment, and contractually due to each secured creditor in the 60 bankruptcy. Next divide by 60.  Name of the creditor  One West Bank	be Program chart. To find ble at the bankruptcy cle enses: Using the number d operating expenses.  ill in the dollar amount s.  ind other debts secured by d all amounts that are of months after you file for Average monthly payment  \$ 1,393.	your home.  Copy	\$ 1,429.00	627.00 Repeat this amount
House Fo answers House H	sing and utilities - Mortgage or rent expenses wer the questions in lines 8-9, use the U.S. Truster tions for this form. This chart may also be available using and utilities - Insurance and operating expenses dollar amount listed for your county for insurance and using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, fillisted for your county for mortgage or rent expenses.  Total average monthly payment for all mortgages and To calculate the total average monthly payment, add contractually due to each secured creditor in the 60 bankruptcy. Next divide by 60.  Name of the creditor  One West Bank	the Program chart. To find the beautiful property clesses: Using the number doperating expenses.  It is in the dollar amount so the control of the debts secured by double all amounts that are companied of the control	your home.  Copy	\$ 1,429.00	Repeat this amount on line 33a.

	☐ 0. Go to line 14.					
	☐ 1. Go to line 12.					
	2 or more. Go to line 12.					
12.	<b>Vehicle operation expense:</b> Using the IRS Local Standards a expenses, fill in the <i>Operating Costs</i> that apply for your Census			aim the c	operating \$	824.00
13.	Vehicle ownership or lease expense: Using the IRS Local S may not claim the expense if you do not make any loan or lease two vehicles.					
Ve	Describe Vehicle 1:					
13a.	Ownership or leasing costs using IRS Local Standard		\$	0.00		
13b.	Average monthly payment for all debts secured by Vehicle 1.					
	Do not include costs for leased vehicles.					
	To calculate the average monthly payment here and on line 13e contractually due to each secured creditor in the 60 months after the divide by 60.					
	Name of each creditor for Vehicle 1	Average monthly payment				
	-NONE-	\$				
	Total Average Monthly Payment	\$0.00	Copy here => -\$	0	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0, e	nter \$0	\$	0.00	Copy net Vehicle 1 expense here => \$ _	0.00
Ve	nicle 2 Describe Vehicle 2:				J	
13d.	Ownership or leasing costs using IRS Local Standard		\$	0.00		
13e.	Average monthly payment for all debts secured by Vehicle 2. Deleased vehicles.	o not include costs for				
	Name of each creditor for Vehicle 2	Average monthly payment				
	-NONE-	\$				
	Total Average Monthly Payment	\$0.00	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense				Copy net	
	Subtract line 13e from line 13d. if this number is less than \$0, e	nter \$0	\$	0.00	Vehicle 2 expense here => \$ _	0.00
14.	Public transportation expense: If you claimed 0 vehicles in Public Transportation expense allowance regardless of wi			s, fill in t	 he \$	0.00
15.	<b>Additional public transportation expense:</b> If you claimed 1 deduct a public transportation expense, you may fill in what you more than the IRS Local Standard for <i>Public Transportation</i> .					0.00

11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.

Oth	er Nece	essary Expenses	In addition to the expense the following IRS categories		ns listed above, y	ou are allowed your monthly expenses for		
16.	self-en pay for that nu	nployment taxes, soci these taxes. Howeve	al security taxes, and Medic er, if you expect to receive a nonthly amount that is withher	are taxes tax refun	s. You may includ d, you must divid	ocal taxes, such as income taxes, le the monthly amount withheld from your e the expected refund by 12 and subtract	\$	1,087.41
17.		ntary deductions: T		uctions t	hat your job requi	ires, such as retirement contributions,		
		·		, such a	s voluntary 401(k	) contributions or payroll savings.	\$	0.00
18.	togethe Do not	er, include payments	that you make for your spou r life insurance on your depe	se's term	life insurance.	nsurance. If two married people are filing pouse's life insurance, or for any form of	\$	0.00
19.	agency	, such as spousal or	child support payments.			the order of a court or administrative  u will list these obligations in line 35.	\$	0.00
20.		<b>ition:</b> The total month	ally amount that you pay for e	ducation	that is either req	uired:		
	_			child if r	o public educatio	on is available for similar services.	\$	0.00
21.	Childo Do not	\$	0.00					
22.	Addition requires savings Payme	\$	0.00					
23.	Option you an service is not r Do not expens	+\$	0.00					
24.		II of the expenses alles 6 through 23.	llowed under the IRS expe	ense allo	wances.		\$	4,764.70
Add		Expense Deduction	These are additional Note: Do not include					
25.		nce, disability insuran				res. The monthly expenses for health necessary for yourself, your spouse, or yo	ur	
	Health	insurance		\$	531.71			
	D: 1.11			· -				
	Disabil	lity insurance		\$	18.60			
		lity insurance savings account				٦		
				\$	18.60	Copy total here=>	\$\$	630.31
	Health Total			\$ + \$	18.60 80.00	Copy total here=>	\$\$	630.31
	Health Total Do you	savings account		\$ + \$	18.60 80.00	Copy total here=>	\$	630.31
26.	Health Total  Do you Continue housel	savings account  a actually spend this to No. How much do you Yes  nued contributions to ue to pay for the reason	ou actually spend?  to the care of household on the care of household on the care at the c	\$\$ \$\$ \$ \$ \$ sor family and supponable to	18.60 80.00 630.31  members. The ort of an elderly, opay for such experience.	Copy total here=>  actual monthly expenses that you will chronically ill, or disabled member of your enses. These expenses may include	\$	630.31
	Do you Continuthouser contribuser	savings account  a actually spend this to No. How much do ye Yes  nued contributions to ue to pay for the reaso nold or member of you to an account of	to the care of household on the care of household on the care of household on the care are family who is upon a qualified ABLE program	\$\$ \$	18.60 80.00 630.31  members. The ort of an elderly, opay for such expo. C. § 529A(b) y monthly expens	actual monthly expenses that you will chronically ill, or disabled member of your enses. These expenses may include es that you incur to maintain the safety of	\$	

Debtor 1	David W Meints
Debtor 2	Elizabeth M Meints

Case number (if known)

28.										
	If you believe that you have home energy cost then fill in the excess amount of home energy		ncluded in e	expens	es on lir	ne 8,				
	You must give your case trustee documentation claimed is reasonable and necessary.	on of your actual expenses, and you must sho	w that the	additio	nal amo	unt	\$	0.00		
29.	Education expenses for dependent childres \$156.25* per child) that you pay for your dependentary or secondary school.					public				
	You must give your case trustee documentation reasonable and necessary and not already ac		lain why the	e amol	ınt clain	ned is				
	* Subject to adjustment on 4/01/16, and every	3 years after that for cases begun on or after	the date of	f adjus	tment.		\$	0.00		
30.	Additional food and clothing expense. The than the combined food and clothing allowance the food and clothing allowances in the IRS N	es in the IRS National Standards. That amou								
	To find a chart showing the maximum addition this form. This chart may also be available at		ed in the se	parate	instruct	ions fo	r			
	You must show that the additional amount cla		\$	0.00						
31.	31. <b>Continuing charitable contributions.</b> The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)3 and (4).									
	Do not include any amount more than 15% of		\$	0.00						
32.	Add all of the additional expense deduction Add lines 25 through 31.		\$_	630.31						
Ded	uctions for Debt Payment									
	For debts that are secured by an interest in and other secured debt, fill in lines 33a thro		nortgages	, vehic	le loan	s,				
	To calculate the total average monthly payment the 60 months after you file for bankruptcy. The		each secu	red cre	editor in					
	Mortgages on your home							age monthly		
33a.	Copy line 9b here					=>	payn \$	1,393.71		
	Loans on your first two vehicles						· —			
33b.	Canylina 12h hara					=>	\$	0.00		
	Copy line 12e here						Ψ_			
33c.	Copy line 13e here					=>	Φ_	0.00		
33d.	List other secured debts:									
Nam	ne of each creditor for other secured debt	Identify property that secures the debt		incl	es paym ude taxe nsuranc	es				
					No					
	-NONE-				Yes		\$			
				_	No					
					No					
					Yes		\$			
					No					
					Yes	_	Ф			
	·				. 55	-	\$ _			
33e	Total average monthly payment. Add lines 33	3a through 33d	\$	1,39	3.71	Copy total here=	,	1,393.71		

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

page 5

			33 secured by your primary support or the support of yo			or			
	No.	Go to line 35.							
	Yes.		nust pay to a creditor, in addition of your property (called the <i>cul</i> below.						
Nam	e of the	creditor	Identify property that secure	s the de	ebt	Total cure amount		Monthly amount	cure
		_	2720 N 87th Street Mil 53222 Milwaukee Cou	ınty	•				
One	e West	Bank	Value based on 2015 a	assess		73,436.56	÷ 60 = \$		1,223.94
					\$		_ ÷ 60 = \$		
			-		\$	-	÷ 60 = +\$	§	
					Total	\$1,223.9	Copy total here=	Φ.	1,223.94
36. Pr	re past  No. Yes.	due as of the filing date of Go to line 36. Fill in the total amount of all priority claims, such as thos Total amount of all past-du	e priority claims	J.S.C. §	s 507.			) \$_	10.00
O E: To th	office of xecutive o find a li	the United States Courts (for Office for United States Trus st of district multipliers that inclu	ated on the list issued by the A districts in Alabama and North stees (for all other districts). Ides your district, go online using is list may also be available at the	Carolin	na) or by the	×5.00			
A	verage i	monthly administrative expens	se			\$67.55	Copy to here=>		67.55
		of the deductions for debt s 33e through 36.	payment.					\$	2,695.20
Total	Deduc	tions from Income							
38. <b>A</b>	dd all o	f the allowed deductions.							
	expense	e 24, All of the expenses allo e allowances		\$	4,764.70	) _			
(	Copy lin	e 32, All of the additional exp	ense deductions	\$	630.31	_			
(	Copy lin	e 37, All of the deductions for	r debt payment	+\$	2,695.20	<u>)                                    </u>			
-	Total de	ductions		\$	8,090.21	Copy total here	=>	\$	8,090.21

39 Conv v			U.S.C. § 1325(b)(	-,				
		rent monthly income from line 1 Current Monthly Income and Ca					\$\$	7,946.81
childre disabilit in accor	en. The monthly ty payments for	ly necessary income you receiv y average of any child support pay r a dependent child, reported in Pa plicable nonbankruptcy law to the ild.	ments, foster care art I of Form 122C	e payments, or -1, that you receive	ed (	s0	0.00	
employe U.S.C.	er withheld fror	tirement deductions. The month in wages as contributions for qualitius as all required repayments of loans b).	fied retirement pla	ns, as specified in		232	2.00	
42. Total o	f all deduction	ns allowed under 11 U.S.C. § 70	7(b)(2)(A). Copy	line 38 here =	=> {	8,090	).21	
and you expense	u have no reaso es. You must g	al circumstances. If special circupnable alternative, describe the spigive your case trustee a detailed expresses.	ecial circumstance	es and their				
Describe th	he special cire	cumstances		Amount of exp	ense			
				\$				
				\$				
				\$		_		
			Total \$_	0.00	- 1	opy ere=>\$	0.00	
44. Total a	ndjustments. A	Add lines 40 through 43.		=>	\$	8,322.21	Copy here=> -\$	8,322.21
45. Calcula	ate your mont	thly disposable income under §	<b>1325(b)(2).</b> Subt	ract line 44 from lir	ne 39		\$	-375.40
art 3: C	change in Inco	ome or Expenses						
in this for bankrup example column	form have chan ptcy petition an e, if the wages I, enter line 2 in	r expenses. If the income in Form ged or are virtually certain to chan d during the time your case will be reported increased after you filed the second column, explain why the dill in the amount of the increase.	ge after the date ye open, fill in the in your petition, cheche wages increas	ou filed your formation below. For 122C-1 in the fir	or			
liloroas								
Form	Line	Reason for change		Date of change	е	Increase or decrease?	Amount o	f change

Debtor 1 David W Meints
Elizabeth M Meints

Sign Below

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X /s/ David W Meints
David W Meints
Signature of Debtor 1

Date April 1, 2016
MM / DD / YYYYY

Case number (if known)

Date April 1, 2016
MM / DD / YYYYY

Page 50 of 60

# **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 10/01/2015 to 03/31/2016.

## Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Dynex

Income by Month:

6 Months Ago:	10/2015	\$5,658.12
5 Months Ago:	11/2015	\$5,658.12
4 Months Ago:	12/2015	\$5,658.12
3 Months Ago:	01/2016	\$8,658.12
2 Months Ago:	02/2016	\$5,658.12
Last Month:	03/2016	\$5,103.36
	Average per month:	\$6,065.66

Debtor 1 Debtor 2 David W Meints

Debtor 2 Elizabeth M Meints

Case number (if known)

## **Current Monthly Income Details for the Debtor's Spouse**

**Spouse Income Details:** 

Income for the Period 10/01/2015 to 03/31/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Nordstom

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$\frac{\$16,607.08}{\$23,202.52}\$ from check dated \$\frac{9/30/2015}{\$12/31/2015}\$.

This Year:

Current Year-to-Date Income: \$4,691.45 from check dated 3/31/2016.

 $Income \ for \ six-month \ period \ (Current+(Ending-Starting)): \ \underline{\$11,286.89} \ .$ 

Average Monthly Income: **\$1,881.15**.

# Notice Required by 11 U.S.C. § 342(b) for **Individuals Filing for Bankruptcy** (Form 2010)

## This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

#### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		:	Liquidation
	\$2	45	filing fee
	\$	75	administrative fee
	+ \$	15	trustee surcharge
	\$33	35	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations:

Page 53 of 60

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form. the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the Means Test, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

## **Chapter 11: Reorganization**

\$1,167 filing fee

administrative fee \$550 \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

#### Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans.

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy\_form s.html#procedure.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

#### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

# **United States Bankruptcy Court** Eastern District of Wisconsin

In	David W Meints  re Elizabeth M Meints		Case No.					
		Debtor(s)	Chapter	13				
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR DI	EBTOR(S)				
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplatio	ling of the petition in bankrupt	cy, or agreed to be pa	id to me, for services rendered or to				
				3,500.00				
	Prior to the filing of this statement I have receive	d	\$	500.00				
	Balance Due		\$	3,000.00				
2.	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
3.	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
4.	■ I have not agreed to share the above-disclosed confirm.	npensation with any other perso	on unless they are men	mbers and associates of my law				
	☐ I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n							
5.	In return for the above-disclosed fee, I have agreed to	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	<ul><li>a. Analysis of the debtor's financial situation, and ren</li><li>b. Preparation and filing of any petition, schedules, st</li><li>c. Representation of the debtor at the meeting of cred</li><li>d. [Other provisions as needed]</li></ul>	tatement of affairs and plan wh	ich may be required;					
	Negotiations with secured creditors to reaffirmation agreements and applicate 522(f)(2)(A) for avoidance of liens on h	tions as needed; preparati						
6.	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any or any other adversary proceeding.	fee does not include the follow lischargeability actions, ju	ing service: Idicial lien avoidar	nces, relief from stay actions				
		CERTIFICATION						
thi	I certify that the foregoing is a complete statement of as bankruptcy proceeding.	any agreement or arrangement t	for payment to me for	representation of the debtor(s) in				
	April 1, 2016	/s/ Adam L. Lon						
	Date	Adam L. Lomba						
		Signature of Attor <b>Lombardo Law</b>						
		10919 West Blu	emound Road					
		Suite 200 Milwaukee, WI 5	3226					
			Fax: (414) 543-078	36				
			dolawoffice.com					
		Name of law firm						

# **United States Bankruptcy Court** Eastern District of Wisconsin

In re	David W Meints Elizabeth M Meints		Case No.	
		Debtor(s)	Chapter	13
Γhe ab		FICATION OF CREDITOR		of their knowledge.
Date:	April 1, 2016	/s/ David W Meints David W Meints		
		Signature of Debtor		
Date:	April 1, 2016	/s/ Elizabeth M Meints		
		Elizabeth M Meints		

Signature of Debtor

Affiliated Dermatologists 2300 North Mayfair Road Suite 855 Milwaukee, WI 53226

Armor Systems 1700 Kiefer Drive #1 Zion, IL 60099-5105

Ceterus Mortgage 14523 SW Millikan Way Beaverton, OR 97005

Great Lakes Higher Education Servicing Corporation 2401 International Lane Madison, WI 53704-2193

Health Payment Systems, Inc. c/o McDorman Law Office 2923 Marketplace Drive, Ste 100 Madison, WI 53719

J. Peterman Legal Group, LTD 165 Bishops Way, Suite 100 Brookfield, WI 53005

One West Bank 888 East Walnut Street Pasadena, CA 91101

St Joseph Regional Medical PO Box 68-9510 Milwaukee, WI 53268

St Joseph's Emergency Physicians 75 REmitt Drive #1574 Chicago, IL 60674

State Collection Serv. 2509 S. Stoughton Rd. Madison, WI 53716

United Collectio Bureau PO Box 140190 Toledo, OH 43614-0190

WE Energies 333 W Everett St., Rm A130 Milwaukee, WI 53203

Wheaton Franciscan PO Box 5434 Dept 0027 Carol Stream, IL 60197 Internal Revenue Service Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346

IRS - Milwaukee Office 211 West Wisconsin Avenue M/S 5301 MIL Milwaukee, WI 53203

Wisconsin Department of Revenue Special Procedures Unit PO Box 8901 Madison, WI 53708-8901